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Fill	in this information to identify you	ır case:							
Del	otor 1 Anthony	Covello, Jr							
	otor 2 ouse, if filing)								
Uni	ted States Bankruptcy Court for	the: EASTERN DISTRICT	OF PENNSYLVANIA	4					
Cas	se number 17-13945					Check if th	is is:		
(If kr	nown)		_			■ An am	ended filing		
						☐ A supp 13 inco	lement showing as of the	ing postpetition chap following date:	ter
0	fficial Form 106l					MM / D	D/ YYYY		
S	chedule I: Your In	come						•	12/15
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this for the Describe Employment 1:	your spouse is not filing w m. On the top of any addit	ith you, do not inclu	de infor	matio	on about you	spouse. If n	nore space is need	ed,
1.	Fill in your employment information.		Debtor 1			Deb	tor 2 or non-	filing spouse	
	If you have more than one job	,	■ Employed				mployed		
	attach a separate page with information about additional	Employment status	☐ Not employed				lot employed		
	employers.	Occupation	Sheet Metal Fal	oricatio	n				
	Include part-time, seasonal, or self-employed work.	Employer's name	East Coast Erec	ctors, Ir	ıc.				
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	New Castle, DE	19720					
		How long employed t	here? <u>new en</u>	nploym	ent				
Par	t 2: Give Details About I	Monthly Income							
	mate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to r	eport for	any l	ine, write \$0 ir	the space. I	nclude your non-filin	g
	u or your non-filing spouse have e space, attach a separate shee		ombine the informatio	n for all e	emplo	oyers for that p	erson on the	lines below. If you n	eed
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	4,919.	20 \$	N/A	
3.	Estimate and list monthly ov	vertime pay.		3.	+\$	0.	00 +\$	N/A	

4,919.20

N/A

4. Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Anthony Covello, Jr			Case	number (if known)	17-1	3945		
					Foi	r Debtor 1	nor	Debtor 2 n-filing sp	ouse	
	Сор	y line 4 here	4.		\$_	4,919.20	\$_		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	a .	\$_	1,977.62	\$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$_	0.00	\$_		N/A	_
	5e.	Insurance	5e 5f		\$_ \$	0.00	\$_ \$		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5g		\$ _	0.00	\$ \$		N/A N/A	_
	5g. 5h.	Other deductions. Specify:	_	ا. ۱.+	\$ _	0.00			N/A	-
6			_		\$ \$		· · ·			_
6. 7.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.		э \$	1,977.62	\$_ \$		N/A	_
			7.		Φ –	2,941.58	Φ_		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00	\$		NI/A	
	8b.	Interest and dividends	8b		\$ \$	0.00	* *		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	OL.	<i>)</i> .	Ψ_	0.00	Ψ		IN/A	-
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.00	\$		N/A	
	8d.	Unemployment compensation	80		\$	0.00	\$_		N/A	_
	8e.	Social Security	86	€.	\$	0.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		N/A	-
	8g.	Pension or retirement income	_ 8g	J.	\$	0.00	\$		N/A	-
	8h.	Other monthly income. Specify: income tax refund	_ 8h	1.+	\$	67.00	+ \$		N/A	_
		fiance's assistance	_		\$_	300.00	\$_		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	367.00	\$_		N/A	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,308.58 + \$		N/A =	\$	3,308.58
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•		Schedule . 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	3,308.58
13.	Do y	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?						ombir nonthi	ned y income

Fill i	n this informa	tion to identify yo	our case:							
Debt	or 1	Anthony Cov	vello, Jr			Ch	eck if t	his is:		
							An a	mended filing		
Debt									ving postpetition chapter	
(Spo	use, if filing)						13 e	xpenses as of	the following date:	
Unite	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF PENNS	YLVANIA		MM	/ DD / YYYY		
Case	number 17	7-13945								
(If kn	nown)									
~ .		4001								
		rm 106J								
		J: Your								/15
info	rmation. If m		eded, atta	If two married people are the another sheet to this another.						
	<u> </u>	•	•							
Part 1.	1: Descri Is this a joir	ribe Your House	hold							_
١.	-									
	■ No. Go to	o line 2. e s Debtor 2 live i	in a conar	ato housahald?						
			iii a separa	ite nousenoid?						
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate Housel	hold of De	ebtor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents				Daughter		2	2 months	■ Yes	
									□ No	
					fiance		3	34	Yes	
									□ No	
									Yes	
									□ No	
3.	Do your eyr	enses include	_						☐ Yes	
J.		f people other the	han	No						
	yourself and	d your depende	nts? ⊔	Yes						
Part	2: Estim	ate Your Ongoi	ng Monthi	v Expenses						
	mate your ex	cpenses as of yo	our bankru	, iptcy filing date unless y y is filed. If this is a supp						_
	licable date.	d date after the i	Janki upto	y is ilieu. Il tilis is a supp	nemental Schedule	J, CHECK	the bo	x at the top of	i the form and mi in th	•
	•	•		government assistance i	•					
	value of sucl icial Form 10		d have inc	luded it on Schedule I: Y	our Income			Your expe	enses	
(•		,								
4.		or home owners		ses for your residence. In r lot.	nclude first mortgage	4.	\$		1,032.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's	s, or renter	s insurance		4b.			0.00	
			•	pkeep expenses		4c.	\$		100.00	
F		owner's associat		lominium dues		4d. 5	\$		0.00	
2	ACCUITIONAL P	UNITED AND NOVIM	ante tor vo	ur residence cuch ac ha	me equity loans	5			$\alpha \alpha \alpha$	

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Anthony Covello, Jr	Case number (if known)	17-13945
S: Electricity, heat, natural das	6a ¢	255.00
	· —	78.00
	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	120.00
		160.00
	·	430.00
		50.00
	· —	120.00
•	· —	50.00
•	11. \$	55.00
	10 ¢	130.00
	·	
		50.00
•	14. \$	40.00
nce.		
	150 f	0.00
	· —	0.00
	· · · · · · · · · · · · · · · · · · ·	0.00
Vehicle insurance	15c. \$	187.00
Other insurance. Specify:	15d. \$	0.00
Do not include taxes deducted from your pay or included in lines 4 or 20.		
<i>y</i> :	16. \$	0.00
· •	· —	0.00
• •	17b. \$	0.00
Other. Specify:	17c. \$	0.00
Other. Specify:	17d. \$	0.00
		0.00
	·	0.00
		0.00
<i>y</i> :		
	· —	0.00
Real estate taxes	20b. \$	0.00
Property, homeowner's, or renter's insurance	20c. \$	0.00
Maintenance, repair, and upkeep expenses	20d. \$	0.00
Homeowner's association or condominium dues	20e. \$	0.00
Specify: diapers, formula	21. +\$	200.00
· · <u> · · · · </u>		
S .		3,057.00
opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
dd line 22a and 22b. The result is your monthly expenses.	\$	3,057.00
		_
•	220 f	0.000.50
		3,308.58
Copy your monthly expenses from line 22c above.	23b\$	3,057.00
Subtract your monthly expenses from your monthly income		
The result is your <i>monthly net income</i> .	23c. \$	251.58
u expect an increase or decrease in your expenses within the year after y	ou file this form?	
		rease or decrease because of a
mple, do you expect to finish paying for your car loan within the year or do you expect you		rease or decrease because of a
		rease or decrease because of a
— SEVICA SINDADIA ANIL HOCO MOCO CONTRIVE REVENUE AND CONTRIVE REVENUE AND CONTRIVERS OF SEVICE SINDADIA AND	Sizelectricity, heat, natural gas Vater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services other. Specify: cable, internet and housekeeping supplies are and children's education costs gg, laundry, and dry cleaning al care products and services il and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inimment, clubs, recreation, newspapers, magazines, and books bible contributions and religious donations roc. include insurance deducted from your pay or included in lines 4 or 20. ife insurance dealth insurance dehicle insurance dehicle insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. inenent or lease payments: car payments for Vehicle 1 car payments for Vehicle 2 other. Specify: byther. Specify: byther. Specify: ayments of alimony, maintenance, and support that you did not report a ed from your pay on line 5, Schedule I, Your Income (Official Form 106I) ayments of alimony, maintenance, and support that you did not report a ed from your pay on line 5, Schedule I, Your Income (Official Form 106I) ayments you make to support others who do not live with you. i. eal property expenses not included in lines 4 or 5 of this form or on Sch fortgages on other property deal estate taxes property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses domeowner's association or condominium dues Specify: diapers, formula ate your monthly expenses Id lines 4 through 21. ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In the substract your monthly expenses from line 22c above. In the substract your monthly expenses from your monthly income. In the substract your monthly expenses from your monthly income.	Sielectricity, heat, natural gas Vater, sewer, garbage collection Gelphone, Internet, satellite, and cable services Ge. \$ Sither, Specify: cable, internet Gel. \$ There, Specify: cable, internet Gel. \$ Sither, Specify: cable, internet Gel. \$ There, Specify: cable, internet Gel. \$ Sither, Specify: cable, internet Gel. \$ There, Specify: cable, internet Gel. \$ Sither, Specify: Gel. \$ Sither,